

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 66631-8013																								
Application Number	10/623,481 - Conf. # 4658	Filed July 18, 2003																								
For DUAL DRUG DOSAGE FORMS WITH IMPROVED SEPARATION OF DRUGS																										
Art Unit	1618	Examiner YOUNG, M. P.																								
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 15%; text-align: center;">Fee</th> <th style="width: 15%; text-align: center;">Small Entity Fee</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$130</td> <td style="text-align: center;">\$65</td> <td style="text-align: center;">\$ 65.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$490</td> <td style="text-align: center;">\$245</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1110</td> <td style="text-align: center;">\$555</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1730</td> <td style="text-align: center;">\$865</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2360</td> <td style="text-align: center;">\$1175</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional required fees, or credit any overpayment, to Deposit Account Number <u>50-4616</u>.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>38,563</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34</p> <p><u>Judy M. Mohr</u> Signature</p> <p>Judy M. Mohr Typed or printed name</p> <p><u>5/20/08</u> Date</p> <p>650-590-0700 Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p>				Fee	Small Entity Fee		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ 65.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2360	\$1175	\$
	Fee	Small Entity Fee																								
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ 65.00																							
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$																							
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$																							
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$																							
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2360	\$1175	\$																							